PART B - FEE(S) TRANSMITTAL

FEB 2 2 2005	his form, together wit		or]	C P A <u>Fax</u> (7	703) 746-4000 T	r Patents inia 22313-1450			
INSTRUCTIONS: This do appropriate. All further ex- indicated this second color maintenance for the incation	In should be used for tran respondence including the below or directed otherwise 18.	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and ders and noting (PUBLICAT ification of a new corre	FION FEE (if requi maintenance fees verspondence address;	red). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed whe correspondence address arate "FEE ADDRESS" for the contract of the con		
	E ADDRESS (Note: Use Block 1 for			No Fe	ote: A certificate of	mailing can only be used f is certificate cannot be used il paper, such as an assignm	or domestic mailings of to		
22511 7	590 12/08/2004			ha	ve its own certificate	of mailing or transmission.	6,		
OSHA & MAY I 1221 MCKINNEY HOUSTON, TX 7	STREET	•	,	I l Str ad tra	Cer nereby certify that the ates Postal Service valuessed to the Mai ansmitted to the USP	tificate of Mailing or Tran is Fee(s) Transmittal is bein with sufficient postage for fill Stop ISSUE FEE address TO (703) 746-4000, on the	smission Ig deposited with the United the United State of State o		
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APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTO	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
09/898,977	07/03/2001		James M. Sullivan			09469/002002	3873		
nonprovisional	SMALL ENTITY NO	ISSUE FEE \$1370		PUBI	\$300	TOTAL FEE(S) DUE \$1670	03/08/2005		
EXAMINER		ART UN	ART UNIT CLASS-SUE		SS-SUBCLASS				
THOMPSON, MARC D		2144 709-238000							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	Γ (print or t	ype)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will app F a substitute	ear on the for filing a	patent. If an assign n assignment.	ee is identified below, the	document has been filed		
` '			B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Omnes			Houston, Texas						
			<u>_</u>		Individual 🖫 C	orporation or other private gr	oup entity Governm		
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4a. The following fee(s) are	enclosed:			A check in the amount of the fee(s) is enclosed. A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.					
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4a. The following fee(s) are Issue Fee	mall entity discount permitte	ed)	Payment The Dire	by credit co		harge the required fee(s), or	credit any overpayment copy of this form).		
4a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # o	mall entity discount permitte	· · · · · · · · · · · · · · · · · · ·	Payment The Dire Deposit Acc	by credit control by credit co	eby authorized by coer 50-0591	harge the required fee(s), or	copy of this form).		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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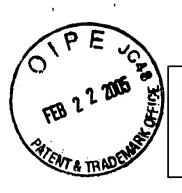
Typed or printed name

Robert P. Lord

Registration No.

February 22, 2005

46,479



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Dated: February 22, 2005 Signature

Docket No.: 09469/002002

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: James M. Sullivan, et al.

Conf. No.: 3873

Application No.: 09/898,977

Group Art Unit: 2144

Filed: July 3, 2001

Examiner: M. D. Thompson

For: PROVIDING SECURE ACCESS TO

NETWORK SERVICES

TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- 1. Part B Fee(s) Transmittal Sheet (1 page);
- 2. Fee Transmittal (1 page);
- 3. Payment by credit card. Form PTO-2038 is attached (1 page). Charge \$1,712.00 to credit card; and
- 4. Certificate of Express Mailing (1 page).

Please charge our Credit Card in the amount of \$1,712.00 covering the required fees. Credit Card Payment Form SB-2038, with a signature from an authorized cardholder, is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted

Application No.: 09/898,977 Docket No.: 09469/002002

to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0591, under Order No. 09469/002002. A duplicate copy of this paper is enclosed.

Dated: February 22, 2005

Respectfully submitted,

Robert P. Lord

Registration No.: 46,479

OSHA & MAY L.L.P.

1221 McKinney St., Suite 2800

Houston, Texas 77010

(713) 228-8600

90755 2

PTO/SB/17 (12-04v2)

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Effective on 12/08	Complete if Known						
Fees pursuant to the Consolidated Approp	Application Number 09/898		9/898,977-Co	,977-Conf. #3873			
FEE TRANS	Filing Date		July 3, 2001				
	First Named Inventor		James M. Sullivan, et al.				
For FY 20	Examiner Name M.		1. D. Thompson				
Applicant claims small entity star	tus. See 37 CFR 1,27	Art Unit 2144		144			
TOTAL AMOUNT OF PAYMENT	Attorney Docket No. 09469/002002						
METHOD OF PAYMENT (check	all that apply)						
Check X Credit Card Money Order None Other (please identify):							
X Deposit Account Deposit Acc	count Number: 50-0591	_ Deposit Account Nan	ne:	Osha & M	ay L.L.P.		
For the above-identified dep	osit account, the Director is	s hereby authorize	d to: (check	all that apply)			
Charge fee(s) indicated	d below	Charge	fee(s) indic	cated below, ex	cept for th	e filing fee	
Charge any additional fee(s) under 37 CFR 1	fee(s) or underpayment of 1.16 and 1.17	x Credit a	any overpay	ments			
FEE CALCULATION		<u>.</u>					
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES						
Fi		ARCH FEES	EXAMINA	ATION FEES			
Application Type Fee (\$	Small Entity 5) Fee (\$) Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility 300	150 500	250	200	100			
Design 200	100 100	50	130	65			
Plant 200	100 300	150	160	80	-		
Reissue 300	150 500	250	600	300			
Provisional 200	100 0	0	0	0			
2. EXCESS CLAIM FEES		· ·	J	v		Small Entity	
Fee Description					Fee (\$)	Fee (\$)	
Each claim over 20 (including Reiss	•				50	25	
Each independent claim over 3 (incl	uding Reissues)				200	100	
Multiple dependent claims					360	180	
Total Claims Extra Claims			<u>Mul</u>	tiple Depende		ļ	
- 20 =	× =		<u>Fee</u>	<u>(\$)</u> <u>F</u>	ee Paid (\$)		
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-3=							
3. APPLICATION SIZE FEE							
If the specification and drawings en							
listings under 37 CFR 1.52(e)), sheets or fraction thereof. See 3			or small ent	ity) for each ac	adiuonai 50		
<u>Total Sheets</u> <u>Extra Shee</u>	,,,,,	dditional 50 or frac	tion thereof	Fee (\$)	Fee P	aid (\$)	
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4. OTHER FEE(S)					Fees F	Paid (\$)	
Non-English Specification, \$13	`	•					
Other (e.g., late filing surcharge)	. 1504 Publication fee		tary, or no	rmal		0.00	
1501 Utility issue fee 1,400.00 8001 Printed copy of patent w/o color 12.00							
SUBMITTED BY) 	Registration No.	46 470	Talachas	/742\ 000	9600	
Signature		(Attorney/Agent)	46,479	Telephone	(713) 228		
Name (Print/Type) Robert P. Lord				Date	February 2	2, 2005	

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Dated: February 22, 2005

Signature: Brenda C. McFadden)

Application No. (if known): 09/898,977

Attorney Docket No.: 09469/002002

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MS Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on February 22, 2005

Date

Porenda C. Me Falden						
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Brenda C. McFadden						
Typed or printed name of person	n signing Certificate					
	(713) 228-8600					
Registration Number, if applicable	Telephone Number					

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Each paper must have its own certificate of mailing, or this certificate must identify

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Transmittal Letter (2 pages)

Issue Fee Part B Transmittal (1 page)

Fee Transmittal (1 page)